

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | W | 71530 | 07-28-99 |
| O.I.P.E. CLASSIFIER | | 16 | 73099 |
| FORMALITY REVIEW | KA | 7162e | 7/23/99 |

INDEX OF CLAIMS

..... Rejected
 Allowed
 (Through numeral)... Canceled
 Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
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